## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10612410

|  |  |   |   |                      |                              |                                       |   |                   |                    | 00  | 1341                           | O .                   |
|--|--|---|---|----------------------|------------------------------|---------------------------------------|---|-------------------|--------------------|-----|--------------------------------|-----------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) |  |   |   |                      |                              |                                       |   | SMALL ENTITY TYPE |                    |     | OTHER THAN<br>SMALL ENTITY     |                       |
| TOTAL CLAIMS                                   |  |   | 42  | E r                  |                              |                                       | RATI                                    | F                 | EE                 | 1   | RATE                           | FEE                   |
| FOR  |  |   | NUMBER FILED                                    |                      | NUMBER EXTRA                 |                                       | BASIC                                   | EE 37             | 75.00              | OR  | BASIC FEE                      | 750.00                |
| то   | TAL CHARGEA                              | BLE CLAIMS  | 49 - minus 20=                                  |                      | *22                          |                                       | X\$ 9                                   | _                 |                    | OR  | X\$18=                         | 700                   |
| INDEPENDENT CLAIMS                             |  |   | /   | nus 3 =              | * /                          | *0                                    |   |                   | ·                  | i i | X84=                           | 396                   |
| MU   | LTIPLE DEPEN                             | DENT CLAIM P  | <del></del>                                     |                      |                              |                                       | X42:                                    |                   |                    | OR  | 7042                           |                       |
|  |  |   |   |                      |                              |                                       | +140                                    | =                 |                    | OR  | +280=                          |                       |
| *  †   | the difference                           | in column 1 is  | less than ze                                    | ero, enter           | r "0" in c                   | column 2                              | TOTA                                    | L                 |                    | OR  | TOTAL                          | 1146                  |
|  | C  |   | AMENDED - PART II                               |                      |                              |                                       |   |                   |                    |     | OTHER<br>SMALL                 |                       |
| _  |  | (Column 1)<br>CLAIMS  | Para Para                                       | (Colur<br>HIGH       |                              | (Column 3)                            | SIVIAI                                  |                   |                    |     | SWALL                          |                       |
| AMENDMENT A                                    |  | REMAINING<br>AFTER<br>AMENDMENT   |   | NUM<br>PREVK<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA                      | RATI                                    | TIC               | DDI-<br>DNAL<br>EE |     | RATE                           | ADDI-<br>TIONA<br>FEE |
|  | Total                                    | *   | Minus   | **                   |                              | =                                     | X\$ 9                                   | =                 |                    | OR  | X\$18=                         |                       |
|  | Independent                              | *   | Minus   | ***                  |                              | =                                     | X42=                                    |                   |                    |     | X84=                           | · · · · · ·           |
|  | FIRST PRESE                              | NTATION OF M  | ULTIPLE DEPENDENT CL                            |                      | Γ CLAIM                      |                                       | -                                       |                   |                    | OR  |                                |                       |
|  |  | •   |   |                      |                              | ·                                     | +140                                    | =                 |                    | OR  | +280=                          |                       |
|  | \$                                       |   |   |                      |                              |                                       | TO<br>ADDIT. F                          |                   |                    | OR  | TOTAL<br>ADDIT. FEE            | :1                    |
|  |  | (Column 1)  |   | (Colu                | mn 2)                        | (Column 3)                            | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                   |                    | •   |                                | 4.5                   |
| AMENDMENT B                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |   | HIGH<br>NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                      | RATE                                    | TIC               | DDI-<br>DNAL<br>EE |     | RATE                           | ADDI-<br>TIONA<br>FEE |
|  | Total                                    | *   | Minus   | **                   |                              | ,<br>≃                                | X\$ 9                                   | =                 |                    | OR  | X\$18=                         |                       |
|  | Independent                              | *   | Minus   | ***                  |                              | =                                     | X42=                                    |                   |                    |     | X84=                           |                       |
| ٩  | FIRST PRESE                              | NTATION OF M  | ULTIPLE DEF                                     | PENDEN               | Γ CLAIM                      |                                       | l <del> </del>                          | $\dashv$          |                    | OR  |                                | <del></del>           |
|  |  |   |   |                      |                              |                                       | +140                                    |                   |                    | OR  |                                |                       |
|  | *  |   |   |                      |                              |                                       | TO1<br>ADDIT, F                         |                   |                    | OR  | TOTAL<br>ADDIT, FEE            | : "                   |
|  |  | (Column 1)  |   |                      | mn 2)                        | (Column 3)                            | •                                       |                   |                    |     | * .                            | •                     |
| AMENDMENT C                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |   | NUM<br>PREVI         | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA                      | RATE                                    | TIC               | DDI-<br>DNAL<br>EE | , n | RATE                           | ADDI<br>TIONA<br>FEE  |
|  | Total                                    | *   | Minus   | **                   |                              | =                                     | X\$ 9                                   |                   |                    | 00  | X\$18=                         |                       |
|  | Independent                              | *   | Minus   | ***                  |                              | =                                     | <del> </del>                            |                   | • • • •            | OR  |                                |                       |
| A  | FIRST PRESE                              | NTATION OF M  | IULTIPLE DEI                                    | PENDEN               | T CLAIN                      |                                       | X42=                                    | 1                 |                    | OR  | X84=                           | <b> </b>              |
|  | :  |   |   |                      |                              |                                       | +140                                    | <b>-</b>          |                    | OR  | +280=                          |                       |
| **   | If the "Highest Nu<br>If the "Highest Nu | mn 1 is less than t<br>mber Previously F<br>Imber Previously F<br>Inber Previously Pa | Paid For <sup>*</sup> IN THI<br>Paid For" IN TH | S SPACE<br>IS SPACE  | is less that<br>is less th   | an 20, enter "20.<br>an 3, enter "3." | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | EE <b>L</b>       | riate bo           |     | TOTAL<br>ADDIT: FEE<br>lumn 1. | · .                   |